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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
09/975,047	10/11/2001	Benny B. Johansen	RXSD 1020-1	1000	
22470	7590 03/15/2006		EXAM	EXAMINER	
	EFFEL & WOLFELD	TRAN, CON P			
P O BOX 366 HALF MOON BAY, CA 94019			ART UNIT	PAPER NUMBER	
	,		2644		

DATE MAILED: 03/15/2006

Please find below and/or attached an Office communication concerning this application or proceeding.

	Application No.	Applicant(s)				
Interview Summary	09/975,047	JOHANSEN ET AL.				
interview Summary	Examiner	Art Unit				
	Con P. Tran	2644				
All participants (applicant, applicant's representative, PTO	personnel):					
(1) <u>Con P. Tran</u> .	(3)					
(2) Mark A. Haynes (Applicants' representative).	(4)	·				
Date of Interview: <u>07 March 2006</u> .						
Type: a)⊠ Telephonic b)⊡ Video Conference c)□ Personal [copy given to: 1)□ applicant 2)□ applicant's representative]						
Exhibit shown or demonstration conducted: d) ☐ Yes e) ☒ No. If Yes, brief description:						
Claim(s) discussed: 1.						
Identification of prior art discussed: Horn (U.S. 6,379,314).						
Agreement with respect to the claims f) was reached. g) was not reached. h) N/A.						
Substance of Interview including description of the general nature of what was agreed to if an agreement was reached, or any other comments: <u>Discussed about differences of Horn and claim language (e.g., computer program, generating, audio stream)</u> . No agreement was reached.						
(A fuller description, if necessary, and a copy of the amendments which the examiner agreed would render the claims allowable, if available, must be attached. Also, where no copy of the amendments that would render the claims allowable is available, a summary thereof must be attached.)						
THE FORMAL WRITTEN REPLY TO THE LAST OFFICE ACTION MUST INCLUDE THE SUBSTANCE OF THE INTERVIEW. (See MPEP Section 713.04). If a reply to the last Office action has already been filed, APPLICANT IS GIVEN A NON-EXTENDABLE PERIOD OF THE LONGER OF ONE MONTH OR THIRTY DAYS FROM THIS INTERVIEW DATE, OR THE MAILING DATE OF THIS INTERVIEW SUMMARY FORM, WHICHEVER IS LATER, TO FILE A STATEMENT OF THE SUBSTANCE OF THE INTERVIEW. See Summary of Record of Interview requirements on reverse side or on attached sheet.						
	SUPERVISORY	IAN CHIN PATENT EXAMINER GY CENTER 2600				
Con P. Irant						
Examiner Note: You must sign this form unless it is an Attachment to a signed Office action.	Examiner's sign	ature, if required				